PTO/SB/01 (03-01) Please type a plus sign (+) inside this box -Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid GMB control number. Attorney Docket Number ALBIHN W 3.3-459 DECLARATION FOR UTILITY OR DESIGN First Named Inventor Harry Wallther PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Not Yet Assigned x Declaration Declaration Filing Date Concurrently Herewith Submitted after Initial Submitted OR N/A with Initial Filing (surcharge Group Art Unit Filing (37 CFR 1.16 (e)) Examiner Name Not Yet Assigned required) As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: DEVICE FOR PERSONAL SAFETY ON SCAFFOLDS (Title of the Invention) the specification of which is attached hereto 09/26/2003 was filed on (MM/DD/YYYY) as United States Application Number or PCT International PCT/SE2003/001502 and was amended on (MM/DD/YYYY) (if applicable). Application No. I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date

Prior Foreign Application	Country	Foreign Filing Date	Priority	Certified Copy Attached?	
Number(s)		(MM/DD/YYYY)	Not Claimed	YES	NO
0202876-9	SE	09/27/2002			×

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application											
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530											
Direct all correspondence to: X Customer Number or Bar Code Label			000	000530		OR	Correspondence address below				
Name											
Address											
City			Stat	tate			ZIP				
Country	Telephone						Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
NAME OF SOLE OR FIRST INVENTOR:				A petition has been filed for this unsigned inventor							
Given Name Harry (first and middle [if an/])				Family f		Wallther					
Inventor's Signature				Date July 6, 2005							
Hind∯s Residence: City	State	Country					Sweden				
Mailing Address: Limmerhultsvägen 60											
Hindås City	State	ZIP	S-43	30 63	3 Sweden						
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned invento							en filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname							
Inventor's Signature						Date	?				
Residence: City State		Country			Citizenship						
Mailing Address:											
City	State	ZIP		· ·	Country						
Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.											

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